Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Todd First name  L. Middle name  Miraglia Last name and Suffix (Sr., Jr., II, III)	Nyree First name  D. Middle name  Miraglia  Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or maiden names.		FKA Nyree Dawn Andrews	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7561	xxx-xx-4862	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	27 Elm Street	If Debtor 2 lives at a different address:			
		Corning, NY 14830  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Steuben				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	otor 1 otor 2	Todd L. Miraglia Nyree D. Miraglia					Case number (if known)	
Par	t 2:	Tell the Court About	Your Bank	ruptcy Ca	ase			
7.	The Bank	chapter of the cruptcy Code you are	Check on	e. (For a l	orief description of ea	ach, see <i>Notice Required by</i> e 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankrupte box.	tcy
	choc	sing to file under	■ Chap	ter 7				
			☐ Chap	ter 11				
			☐ Chap	ter 12				
			☐ Chap	ter 13				
8.	How	you will pay the fee	abo	out how yo	ou may pay. Typically attorney is submittir	y, if you are paying the fee yo	ck with the clerk's office in your local court for more of purself, you may pay with cash, cashier's check, or r alf, your attorney may pay with a credit card or chec	noney
			☐ Inc	eed to pa	y the fee in installm	ents. If you choose this option	on, sign and attach the Application for Individuals to	Pay
			☐ I re	equest that is not req	uired to, waive your	(You may request this optio fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty li	ine that
							n installments). If you choose this option, you must f cial Form 103B) and file it with your petition.	ill out
9.	bank	you filed for ruptcy within the	■ No.					
	last	3 years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy s pending or being	■ No					
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	□ No.	Go to	line 12.			
	resid	lence?	Yes.	Has yo	our landlord obtained	an eviction judgment agains	st you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial</i> s bankruptcy petition		Judgment Against You (Form 101A) and file it with t	his

	tor 2 Nyree D. Miraglia			Case number (if known)		
Part	Report About Any Bu	ısinesses	ou Own as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a		Number, Street, City, State & ZIP Code			
	separate sheet and attach it to this petition.		Check the appropriate box to describe your bu	usiness:		
			☐ Health Care Business (as defined in 1	1 U.S.C. § 101(27A))		
			☐ Single Asset Real Estate (as defined in	n 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as defined in 11 U.S.C. §	101(53A))		
			☐ Commodity Broker (as defined in 11 U	.S.C. § 101(6))		
			☐ None of the above			
13. Are you filing under Chapter 11, the court must know whether you are a small business debtor so that deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, and business debtor?				otor, you must attach your most recent balance sheet, statement of		
	For a definition of small	No.	I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am filing under Chapter 11 and I am a small	business debtor according to the definition in the Bankruptcy Code.		
Par	Report if You Own or	Have Any	lazardous Property or Any Property That Nee	eds Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	Vhat is the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?		f immediate attention is leeded, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Vhere is the property?			
	<u>-</u>		Number, Street, City,	State & Zip Code		

Debtor 1 **Todd L. Miraglia** Debtor 2 **Nyree D. Miraglia** 

Case number (if known)

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 tor 2	Todd L. Miraglia Nyree D. Miraglia				Case no	number (if known)	
Pari	t 6:	Answer These Questi	ons for Rep	orting Purposes				
	Wha	t kind of debts do	16a. <b>A</b>				re defined in 11 U.S.C. § 101(8) as "incurred by a	an
	•			No. Go to line 16b.	,,			
				■ Yes. Go to line 17.				
				re your debts primarily busine oney for a business or investmen				
				No. Go to line 16c.				
			_	Yes. Go to line 17.				
			16c. S	tate the type of debts you owe th	at are not consum	ner debts or bu	usiness debts	
17.		ou filing under ter 7?	□ No. I a	am not filing under Chapter 7. Go	o to line 18.			
Do you estimate that after any exempt property is excluded and		■ Yes. la	am filing under Chapter 7. Do you re paid that funds will be available	u estimate that aft e to distribute to u	er any exempt insecured cred	t property is excluded and administrative expens ditors?	ses	
		nistrative expenses aid that funds will		No				
	be av	vailable for ibution to unsecured itors?		] Yes				
18.		many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b>25,001-50,000</b>	
	you o	estimate that you	□ 50-99		☐ 5001-10,000 ☐ 40,004,05,00		☐ 50,001-100,000 ☐ More than100,000	
			□ 100-199 □ 200-999		□ 10,001-25,00	JO	□ More than 100,000	
19.		How much do you estimate your assets to be worth?	<b>\$0 - \$50</b> ,	000	□ \$1,000,001 -	\$10 million	□ \$500,000,001 - \$1 billion	
			\$50,001		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
				1 - \$500,000 1 - \$1 million	☐ \$100,000,001 ☐ \$100,000,00			
20.		much do you nate your liabilities	□ \$0 - \$50,	000	<u> </u>		☐ \$500,000,001 - \$1 billion	
	to be		■ \$50,001		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
				1 - \$500,000 1 - \$1 million	□ \$100,000,00			
Part	t 7:	Sign Below						
For	you		I have exam	nined this petition, and I declare u	under penalty of p	erjury that the	information provided is true and correct.	
							igible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7.	
				y represents me and I did not pa have obtained and read the noti			o is not an attorney to help me fill out this (b).	
			I request rel	ief in accordance with the chapte	er of title 11, Unite	d States Code	e, specified in this petition.	
							oney or property by fraud in connection with a o 20 years, or both. 18 U.S.C. §§ 152, 1341, 15	19,
			/s/ Todd L			/s/ Nyree D.		_
			Todd L. M Signature of			Nyree D. Mi Signature of D		
			Executed or	October 23, 2019 MM / DD / YYYY		Executed on	October 23, 2019 MM / DD / YYYY	-

Debtor 1	Todd L. Miraglia	
Debtor 2	Nyree D. Miraglia	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mark A. Weiermiller, Esq.	Date	October 23, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Mark A. Weiermiller, Esq.		
Printed name		
Cooper, Pautz, Weiermiller & Daubner, LLP		
Firm name		
2854 Westinghouse Road		
Horseheads, NY 14845		
Number, Street, City, State & ZIP Code		
Contact phone <b>607-739-8763</b>	Email address	mweiermiller@cpwdlaw.com
- State Bar#321-65-0987 NY		
Bar number & State		

Fill	n this information to identify your case	<b>:</b>			
	tor 1 Todd L. Miraglia	•			
	First Name	Middle Name	Last Name		
1	tor 2 Nyree D. Miraglia se if, filing) First Name	Middle Name	Last Name		
``	3,	ESTERN DISTRICT OF N			
Offin	ed States Bankruptcy Court for the.	LSTERN DISTRICT OF N	LW TORK		
Cas (if kn	e number <sub></sub>			□ Che	eck if this is an
Ĺ	,				ended filing
Of	icial Form 106Sum				
		d Liabilities and	Certain Statistical Information		12/15
info	mation. Fill out all of your schedules fir original forms, you must fill out a new	rst; then complete the in	filing together, both are equally responsible f formation on this form. If you are filing amend box at the top of this page.		
					r assets e of what you own
1.	<b>Schedule A/B: Property</b> (Official Form 3 1a. Copy line 55, Total real estate, from 5	106A/B) Schedule A/B		\$_	29,528.32
	1b. Copy line 62, Total personal property	, from Schedule A/B		\$_	9,392.00
	1c. Copy line 63, Total of all property on	Schedule A/B		\$	38,920.32
Par	2: Summarize Your Liabilities				
					r liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A		ricial Form 106D) pottom of the last page of Part 1 of <i>Schedule D</i>	\$_	0.00
3.	Schedule E/F: Creditors Who Have Unsela. Copy the total claims from Part 1 (pr	ecured Claims (Official For iority unsecured claims) fr	rm 106E/F) om line 6e of <i>Schedule E/F</i>	\$_	0.00
	3b. Copy the total claims from Part 2 (no	onpriority unsecured claims	s) from line 6j of Schedule E/F	\$_	51,200.96
			Your total liabilities	\$	51,200.96
Par	3: Summarize Your Income and Exp	enses			
4.	Schedule I: Your Income (Official Form 1 Copy your combined monthly income fro	,		\$_	2,314.00
5.	Schedule J: Your Expenses (Official Form Copy your monthly expenses from line 2:	,		\$_	2,344.20
Par	4: Answer These Questions for Adn	ninistrative and Statistic	al Records		
6.	Are you filing for bankruptcy under Cl  ☐ No. You have nothing to report on the content of the	•	this box and submit this form to the court with yo	ur other	schedules.
	Yes				
7.	What kind of debt do you have?				
			s are those "incurred by an individual primarily for r statistical purposes. 28 U.S.C. § 159.	a persor	nal, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,694.18

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	40,423.86
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	40,423.86

			of 7		at .40130 t	ased on in	e tenant's age
County			prop		ப <sub>(see in:</sub> m, such as lo	structions)	nunity property
Steuben			Who	Other has an interest in the property? Check one Debtor 1 only	(such as fo		our ownership interest ncy by the entireties, or
<b>Corning</b> City	NY State	14830-0000 ZIP Code		Land Investment property Timeshare	Current va entire prop \$2		Current value of the portion you own? \$29,528.32
27 Elm St Street address,	reet if available, or other desc	ription		single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home	the amount	of any secured	ms or exemptions. Put claims on <i>Schedule D:</i> is <i>Secured by Property</i> .
	have any legal or equ			Estate You Own or Have an Interest In lence, building, land, or similar property?			
Schedul n each category, s hink it fits best. E	e A/B: Pr separately list and de se as complete and a se space is needed, a	scribe items. List a	e. If two	only once. If an asset fits in more than one married people are filing together, both are his form. On the top of any additional pages	equally resp	onsible for su	plying correct
Case number	orm 106A/B						☐ Check if this is an amended filing
United States Ba	ankruptcy Court for t	he: WESTERN	DISTR	ICT OF NEW YORK			
Debtor 2 (Spouse, if filing)	Nyree D. Mira First Name	nglia Middle	Name	Last Name			
Debtor 1	Todd L. Mirag	Middle	Name	Last Name			

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

3. <b>Ca</b>	or 2 Nyree D. Miraglia		Cá	ase number (if known)	
	rs, vans, trucks, tractors, spo	rt utility vel	nicles, motorcycles		
	No				
	Yes				
3.1	Make: <b>Honda</b>		Who has an interest in the property? Check one		claims or exemptions. Put
	Model: Civic		☐ Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year: <b>2003</b>		■ Debtor 2 only		, , ,
		269,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:		☐ At least one of the debtors and another		
	Location: 27 Elm Street, Corning NY 14830		☐ Check if this is community property (see instructions)	\$1,125.00	\$1,125.0
3.2	Make: <b>Jeep</b>		Who has an interest in the property? Check one		claims or exemptions. Put
٥.٢	Model: Liberty		Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year: 2002		Debtor 1 only  Debtor 2 only		, , ,
		160,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:		☐ At least one of the debtors and another		
	Location: 27 Elm Street,			40	<b></b>
	Corning NY 14830		☐ Check if this is community property (see instructions)	\$875.00	\$875.0
	No Yes				
<b>П</b>	Yes dd the dollar value of the porti		n for all of your entries from Part 2, including an		\$2,000,00
<b>П</b>	Yes dd the dollar value of the porti		n for all of your entries from Part 2, including an hat number here		\$2,000.00
5 Ao pa	Yes  dd the dollar value of the porti ages you have attached for Pa  Describe Your Personal and H	rt 2. Write t	hat number here		<u> </u>
□ Ao .pa	Yes  dd the dollar value of the porti ages you have attached for Pa  Describe Your Personal and H ou own or have any legal or ea	rt 2. Write t lousehold Ite quitable int	hat number here		Current value of the portion you own?
Do y	Yes  dd the dollar value of the portinges you have attached for Pa  Describe Your Personal and Hou own or have any legal or each out the policy of the polic	rt 2. Write t lousehold Ite quitable int	ems erest in any of the following items?		Current value of the portion you own? Do not deduct secured
Do y	Yes  dd the dollar value of the portinges you have attached for Pa  Describe Your Personal and Hou own or have any legal or examples: Major appliances, furni	rt 2. Write t lousehold Ite quitable int	ems erest in any of the following items?		Current value of the portion you own? Do not deduct secured
5 A(past 3 Do y	Yes  dd the dollar value of the portiages you have attached for Pa  Describe Your Personal and Hoou own or have any legal or examples: Major appliances, furning No  Yes. Describe  3 beds kitchei	rt 2. Write to lousehold lte quitable int gs ture, linens, s, 5 dresse n appliance	china, kitchenware ers, nightstands, lamps, 2 sofas, loveseat, ces, curio cabinet, pots and pans, 3 books	LR chair,	Current value of the portion you own? Do not deduct secured
5 A(past 3 Do y	Yes  dd the dollar value of the portinges you have attached for Pa  Describe Your Personal and Hoou own or have any legal or examples: Major appliances, furning No  Yes. Describe  3 beds kitcheidesk, of	rt 2. Write to lousehold lte quitable int gs ture, linens, s, 5 dresse n appliance coffee ma	ems erest in any of the following items?  china, kitchenware ers, nightstands, lamps, 2 sofas, loveseat,	LR chair,	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ 5 Ai .pa  Part : Do y  Ho  E:  □ □  T. Ele  E:	Yes  dd the dollar value of the portinges you have attached for Pa  Describe Your Personal and Hou own or have any legal or enterprise to the policy of the	rt 2. Write to construct the construction of t	china, kitchenware  ers, nightstands, lamps, 2 sofas, loveseat, ces, curio cabinet, pots and pans, 3 books ker and patio furniture in Street, Corning NY 14830	LR chair,	Current value of the portion you own? Do not deduct secured claims or exemptions.
5 An part \$5 An Do y	Yes  dd the dollar value of the portinges you have attached for Pa  Describe Your Personal and Hou own or have any legal or enterprise to the partial of the portion of the	rt 2. Write to construct the construction of t	china, kitchenware  ers, nightstands, lamps, 2 sofas, loveseat, ces, curio cabinet, pots and pans, 3 books ker and patio furniture in Street, Corning NY 14830	LR chair,	Current value of the portion you own? Do not deduct secured claims or exemptions.

Debto Debto		Todd L. Mira Nyree D. Mir		er (if known)
Ex	ampl No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; ons, memorabilia, collectibles	stamp, coin, or baseball card collections;
			Misc. books and family pictures Location: 27 Elm Street, Corning NY 14830	\$300.00
			Compact disc collection Location: 27 Elm Street, Corning NY 14830	\$50.00
Ex	ampl No	ent for sports a es: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, s	kis; canoes and kayaks; carpentry tools;
			Camping equipment Location: 27 Elm Street, Corning NY 14830	\$100.00
			2 bicycles Location: 27 Elm Street, Corning NY 14830	\$100.00
			Fishing equipment including 3 fishing poles and misc. tackle Location: 27 Elm Street, Corning NY 14830	\$100.00
			Treadmill and AB lounger Location: 27 Elm Street, Corning NY 14830	\$200.00
11. <b>CI</b>	No Yes. lother xamp	oles: Pistols, rifle  Describe	s, shotguns, ammunition, and related equipment othes, furs, leather coats, designer wear, shoes, accessories	
			Misc. clothing, shoes and accessories Location: 27 Elm Street, Corning NY 14830	\$350.00
	xamp No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watc	hes, gems, gold, silver
			Wedding bands Location: 27 Elm Street, Corning NY 14830	\$250.00
			Diamond engagement ring	\$125.00

Debtor 1 Debtor 2	Todd L. Mira Nyree D. Mir					oer (if known)		
			costume jewlerg on: 27 Elm Stre	/ et, Corning NY 14830		\$250.00		
Exam	arm animals ples: Dogs, cats, Describe	birds, hoi	rses					
		Pet do		et, Corning NY 14830		\$100.00		
☐ No	ther personal ar		-	I not already list, including any health a	aids you did not list			
	·	Misc.	gardening tools			\$50.00		
		Locati	on: 27 EIM Stre	et, Corning NY 14830		φ30.00		
				Part 3, including any entries for pages	you have attached	\$5,725.00		
	escribe Your Finar							
Do you o	wn or have any ∣	legal or e	quitable interest i	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
16. <b>Cash</b> <i>Exam</i> □ No	ples: Money you	have in y	our wallet, in your h	ome, in a safe deposit box, and on hand v	when you file your petition	on		
Yes.								
					Cash	\$2.00		
Exam				counts; certificates of deposit; shares in cr is with the same institution, list each. Institution name:	redit unions, brokerage h	nouses, and other similar		
		17.1.	Checking	Corning Credit Union		\$5.00		
		17.2.	Savings	Corning Credit Union		\$5.00		
		17.3.	Checking	Five Star Bank		\$0.00		
Exam ■ No			ely traded stocks ent accounts with b	rokerage firms, money market accounts				

Official Form 106A/B Schedule A/B: Property page 4

	btor 1 btor 2	Todd L. Miraglia Nyree D. Miraglia		Ca:	se number (if known)		
	joint v	n-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and nt venture					
	■ No □ Yes.	Give specific information	on about them		of ownership:		
	Negoti Non-ne ■ No	iable instruments include egotiable instruments ar Give specific information	e personal checks, cash e those you cannot trar	iable and non-negotiable instruments niers' checks, promissory notes, and mone sfer to someone by signing or delivering the			
		ment or pension accou	nts	03(b), thrift savings accounts, or other pens	ion or profit-sharing plans		
	Yes.	List each account separ Typ	rately. e of account:	Institution name:			
		Rot	h IRA	Corning Credit Union	\$5.00		
23.	■ No □ Yes.	ies (A contract for a per		ublic utilities (electric, gas, water), telecom Institution name or individual:  to you, either for life or for a number of ye			
		C. §§ 530(b)(1), 529A(b	), and 529(b)(1).	alified ABLE program, or under a qualif  Separately file the records of any interest			
	■ No	, equitable or future into		her than anything listed in line 1), and ri	ghts or powers exercisable for your benefit		
	Examp ■ No		mes, websites, proceed	d other intellectual property is from royalties and licensing agreements			
	Examp ■ No	es, franchises, and otholes: Building permits, ex	clusive licenses, coope	s erative association holdings, liquor licenses	, professional licenses		
		property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.		

Debtor 1 Debtor 2	Todd L. Miraglia Nyree D. Miraglia		Case number (if known)					
☐ No	refunds owed to you o es. Give specific information about them, including whether you already filed the returns and the tax years							
■ Ye	s. Give specific information about th	em, including whether you already	filed the returns and the tax years					
		Estimated 2019 income tax (prorated)	refunds Federal and NYS	\$1,650.00				
<i>Exai</i> ■ No	ly support  mples: Past due or lump sum alimor  s. Give specific information	ny, spousal support, child support,	maintenance, divorce settlement, property	settlement				
Exai	benefits; unpaid loans you m		s, sick pay, vacation pay, workers' compen	sation, Social Security				
31. Inter	s. Give specific information  ests in insurance policies  mples: Health, disability, or life insur	ance; health savings account (HSA	A); credit, homeowner's, or renter's insuran	ce				
	s. Name the insurance company of Company r		Beneficiary:	Surrender or refund value:				
If you some	nterest in property that is due you are the beneficiary of a living trust eone has died.  S. Give specific information		ance policy, or are currently entitled to rece	ive property because				
<i>Exai</i> ■ No	ns against third parties, whether apples: Accidents, employment disposes. Describe each claim							
■ No	r contingent and unliquidated cla	ims of every nature, including co	ounterclaims of the debtor and rights to	set off claims				
35. <b>Any</b> f	inancial assets you did not alrea s. Give specific information	dy list						
	I the dollar value of all of your en Part 4. Write that number here		entries for pages you have attached	\$1,667.00				
Part 5:	Describe Any Business-Related Prope	rty You Own or Have an Interest In. L	ist any real estate in Part 1.					
	u own or have any legal or equitable i	nterest in any business-related prope	erty?					

Official Form 106A/B Schedule A/B: Property page 6

☐ Yes. Go to line 38.

Debt Debt		Todd L. Miraglia Nyree D. Miraglia		Case number (if known)	
Part (		cribe Any Farm- and Commercial Fishing-Related Property You Cou own or have an interest in farmland, list it in Part 1.	own or Have an Interes	t In.	
46. <b>C</b>	o you	own or have any legal or equitable interest in any farm-	r commercial fishin	g-related property?	
l	No.	Go to Part 7.			
l	☐ Yes.	Go to line 47.			
Part 1	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
		have other property of any kind you did not already list? les: Season tickets, country club membership			
	No ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Yes. (	Give specific information			
54.	Add ti	ne dollar value of all of your entries from Part 7. Write tha	number here		\$0.00
Part 8	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$29,528.32
56.	Part 2	: Total vehicles, line 5	\$2,000.00		
57.	Part 3	: Total personal and household items, line 15	\$5,725.00		
58.	Part 4	: Total financial assets, line 36	\$1,667.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$9,392.00	Copy personal property total	\$9,392.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$38,920.32

Fill in this infor	mation to identify you	ur case:		
Debtor 1	Todd L. Miragli			
	First Name	Middle Name	Last Name	
Debtor 2	Nyree D. Miragl	ia		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the	: WESTERN DISTRICT O	OF NEW YORK	
Case number (if known)				☐ Check if this is an
				amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as	Exempt
--	--------

Pa	rt 1: Identify the Property You Claim as E	xempt						
1.	Which set of exemptions are you claiming?	ich set of exemptions are you claiming? Check one only, even if your spouse is filling with you.						
	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	☐ You are claiming federal exemptions. 11 L	J.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exem portion you own		ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	27 Elm Street Corning, NY 14830	\$29,528.32		\$85,400.00	NYCPLR § 5206			
	Steuben County (Full value-\$64,000-remainder valued at .46138 based on life tenant's age of 74) Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	2003 Honda Civic 269,000 miles Location: 27 Elm Street, Corning NY	\$1,125.00		\$1,125.00	NYCPLR § 5205(a)(8)			
	14830 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	2002 Jeep Liberty 160,000 miles Location: 27 Elm Street, Corning NY	\$875.00		\$875.00	NYCPLR § 5205(a)(8)			
	14830 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit				

Line from Schedule A/B: 6.1

14830

Official Form 106C

\$3.000.00

3 beds, 5 dressers, nightstands,

coffee maker and patio furniture Location: 27 Elm Street, Corning NY

lamps, 2 sofas, loveseat, LR chair, kitchen appliances, curio cabinet,

pots and pans, 3 bookshelves, desk,

NYCPLR § 5205(a)(5)

\$3,000.00

100% of fair market value, up to

any applicable statutory limit

er and printer Y Elm Street, Corning NY edule A/B: 7.1 and family pictures Y Elm Street, Corning NY	Current value of the portion you own Copy the value from Schedule A/B \$750.00		sck only one box for each exemption.  \$750.00  100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption  NYCPLR § 5205(a)(5)
r Elm Street, Corning NY edule A/B: 7.1 and family pictures r Elm Street, Corning NY		_	100% of fair market value, up to	NYCPLR § 5205(a)(5)
and family pictures Zelm Street, Corning NY	\$300.00			
' Elm Street, Corning NY	\$300.00		any approadre etatatery mini	
edule A/B: <b>8.1</b>			\$300.00	NYCPLR § 5205(a)(2)
			100% of fair market value, up to any applicable statutory limit	
ng, shoes and	\$350.00		\$350.00	NYCPLR § 5205(a)(5)
' Elm Street, Corning NY edule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
nds	\$250.00		\$250.00	NYCPLR § 5205(a)(6)
14830 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
gagement ring	\$125.00		\$125.00	NYCPLR § 5205(a)(6)
edule A/B: <b>12.2</b>			100% of fair market value, up to any applicable statutory limit	
ne jewlery ZEIm Street, Corning NY	\$250.00		\$250.00	NYCPLR § 5205(a)(6)
edule A/B: <b>12.3</b>			100% of fair market value, up to any applicable statutory limit	
ZEIm Street, Corning NY	\$100.00		\$100.00	NYCPLR § 5205(a)(4)
edule A/B: <b>13.1</b>			100% of fair market value, up to any applicable statutory limit	
NYS: Estimated 2019	\$1,650.00		\$825.00	NYCPLR § 5205(a)(9)
edule A/B: <b>28.1</b>			100% of fair market value, up to any applicable statutory limit	
	r Elm Street, Corning NY edule A/B: 11.1  Inds r Elm Street, Corning NY edule A/B: 12.1  gagement ring r Elm Street, Corning NY edule A/B: 12.2  me jewlery r Elm Street, Corning NY edule A/B: 12.3  r Elm Street, Corning NY edule A/B: 13.1  NYS: Estimated 2019 refunds (prorated) edule A/B: 28.1	Telm Street, Corning NY  Pedule A/B: 11.1  Inds Telm Street, Corning NY  Pedule A/B: 12.1  Igagement ring Telm Street, Corning NY  Pedule A/B: 12.2  Indicate the street of the street o	Telm Street, Corning NY  edule A/B: 11.1  Inds Telm Street, Corning NY  edule A/B: 12.1  gagement ring Telm Street, Corning NY  edule A/B: 12.2  Indicate the street of th	## Elm Street, Corning NY  ## adule A/B: 11.1  ## sedule A/B: 11.1  ## sedule A/B: 11.1  ## sedule A/B: 12.1  ## sedule A/B: 12.2  ## sedule A/B: 12.2  ## sedule A/B: 12.2  ## sedule A/B: 12.3  ## sedule A/B: 13.1  ## s

No

Yes

☐ Check if this is an amended filing

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

						_			
Fill in this in	formation to identify your	case:							
Debtor 1	Todd L. Miraglia								
	First Name	Middle Name	L	ast Name					
Debtor 2	Nyree D. Miraglia	l							
(Spouse if, filing)	First Name	Middle Name	L	ast Name					
United States	Bankruptcy Court for the:	WESTERN DIS	TRICT OF NEW Y	ORK					
Case number									
(if known)							check if this is an		
						a	mended filing		
Official Ed	orm 106E/F								
	E/F: Creditors W	/ha Haya H	ncooured C	laima			12/15		
	and accurate as possible. Us								
name and case	Continuation Page to this page number (if known).  St All of Your PRIORITY Ur	-	formation to report	in a Part, o	do not file that Part. On th	e top of any addi	tional pages, write your		
1. Do any cre	editors have priority unsecure	ed claims against yo	ou?						
No. Go	No. Go to Part 2.								
☐ Yes.									
Part 2: Lis	st All of Your NONPRIORIT	TY Unsecured Cla	aims						
3. Do any cre	editors have nonpriority unse	cured claims agains	st you?						
☐ No. You	u have nothing to report in this p	part. Submit this form	to the court with you	r other sche	edules.				
Yes.									
4. List all of	your nonpriority unsecured cl	laims in the alnhah	atical order of the c	reditor who	holds each claim. If a cru	aditor has more tha	n one poppriority		
unsecured	claim, list the creditor separatel	ly for each claim. For	each claim listed, ide	entify what t	type of claim it is. Do not list	t claims already inc	cluded in Part 1. If more		
than one cr Part 2.	reditor holds a particular claim, l	list the other creditor	s in Part 3.If you have	e more than	three nonpriority unsecure	d claims fill out the	Continuation Page of		
							Total claim		
4.1 Arno	ot Medical Services PC	Las	st 4 digits of accoun	t number			\$77.00		
•	iority Creditor's Name	14/1-			2015				
	lvy Street ra, NY 14905	vvn	en was the debt inc	urrea?	2015		-		
	er Street City State Zip Code	As	of the date you file,	the claim i	is: Check all that apply				
Who i	ncurred the debt? Check one.								
☐ De	ebtor 1 only		Contingent						
■ De	ebtor 2 only		Unliquidated						
☐ De	ebtor 1 and Debtor 2 only		Disputed						
☐ At	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:								
□сн	eck if this claim is for a com	munity	Student loans						
debt	alaim auhiaat ta affaat0			ut of a sepa	aration agreement or divorce	e that you did not			
_	claim subject to offset?		ort as priority claims	orofit charin	ng plans, and other similar o	lahts			
■ No						ienta			
☐ Ye	S		Other, Specify Me	aical Se	rvices				

Debtor Debtor	1 Todd L. Miraglia 2 Nyree D. Miraglia	Case number (if known)	
4.2	Arnot Ogden Medical Center Nonpriority Creditor's Name	Last 4 digits of account number	\$145.00
	600 Roe Avenue Elmira, NY 14901	When was the debt incurred? 2015	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical services	
4.3	Associated Radiologists	Last 4 digits of account number	\$40.32
	Nonpriority Creditor's Name 100 E. 14th St. Elmira Heights, NY 14903	When was the debt incurred? 2015	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	La res	Other. Specify Medical Services	
4.4	Capital One Bank (USA), NA Nonpriority Creditor's Name	Last 4 digits of account number	\$460.91
	P.O. Box 71083 Charlotte, NC 28272-1083	When was the debt incurred? 2015	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	

Debtor Debtor	1 Todd L. Miraglia 2 Nyree D. Miraglia	Case number (if known)	
4.5	CareCredit/Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$1,987.00
	P.O. Box 960061 Orlando, FL 32896-0061	When was the debt incurred? 2012-2014	
•	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	□ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.6	Corning Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$1,114.39
	1 Guthrie Drive Corning, NY 14830-3696	When was the debt incurred? 2013	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	
4.7	Credit One Bank	Last 4 digits of account number	\$611.00
	Nonpriority Creditor's Name P.O. Box 60500	When was the debt incurred? 2013-2014	
	City of Industry, CA 91716-0500  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Credit card debt	
	00	Outer. Specify	

Debtor 1 Debtor 2	Todd L. Miraglia Nyree D. Miraglia	Case number (if known)	
	Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	\$40,423.86
I	P.O. Box 2837 Portland, OR 97208	When was the debt incurred? 2009	
1	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
l	Debtor 1 only	Contingent	
_	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	■ Student loans	
(	☐ Check if this claim is for a community debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	☐ Other. Specify	
		Student loans	
	Emergency Physician Services Nonpriority Creditor's Name	Last 4 digits of account number	\$1,547.00
I	P.O. Box 740021 Cincinnati, OH 45274	When was the debt incurred? 2013	
1	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
ı	Debtor 1 only	☐ Contingent	
I	Debtor 2 only	☐ Unliquidated	
I	■ Debtor 1 and Debtor 2 only	Disputed	
ı	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
I	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
I	Yes	■ Other. Specify Medical Services	
_	Five Star Urgent Care	Last 4 digits of account number	\$114.00
	Nonpriority Creditor's Name 830 County Route 64 Elmira, NY 14903	When was the debt incurred? 2015	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
'	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
I	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	ls the claim subject to offset?	report as priority claims	
İ	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
l	□ Yes	■ Other. Specify Medical Services	

Nyree D. Miraglia	Case number (if known)			
Guthrie Clinic, Ltd.	Last 4 digits of account number	\$240.0		
Nonpriority Creditor's Name				
Guthrie Square Sayre, PA 18840	When was the debt incurred? 2016			
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only □ Disputed				
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans			
lebt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No □ Debts to pension or profit-sharing plans, and other similar debts				
☐Yes	Other. Specify Medical services			
Kay Jewelers	Last 4 digits of account number	\$300.00		
Nonpriority Creditor's Name				
375 Ghent Road Akron, OH 44333-2668	When was the debt incurred? 10/18			
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	Student loans			
s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
- No	☐ Debts to pension or profit-sharing plans, and other similar debts			
☐Yes	■ Other. Specify <b>jewelry purchase</b>			
Quest Diagnostics	Last 4 digits of account number	\$53.74		
Nonpriority Creditor's Name		<del></del>		
P.O. Box 740505	When was the debt incurred? 2017			
Cincinnati, OH 45274  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	As of the date you me, the dam is. Oneon all that apply			
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ Debtor Fand Debtor 2 only  ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
s the claim subject to offset?				
s the claim subject to offset?  No	□ Debts to pension or profit-sharing plans, and other similar debts			

Nyree D. Miraglia		
STHCC	Last 4 digits of account number	\$600.00
Nonpriority Creditor's Name 225 W. Water St.	When was the debt incurred? 2016	
Elmira, NY 14901  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Services	
Twin Tiers Eye Care Associates	Last 4 digits of account number	\$221.39
Nonpriority Creditor's Name 207 Madison Ave. Elmira, NY 14901-3204	When was the debt incurred? 2015	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Services	
Verizon Wireless	Last 4 digits of account number	\$2,407.65
Nonpriority Creditor's Name P.O. Box 26055	When was the debt incurred? 2015	,,
Minneapolis, MN 55426		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify cell phone charges	

	1 Todd L. Miraglia 2 Nyree D. Miraglia		Case number (if known)		
4.1	Verizon Wireless	Last 4 digits of account numbe	r	\$857.70	
	Nonpriority Creditor's Name P.O. Box 26055	When was the debt incurred?	2013	·	
-	Minneapolis, MN 55426				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the clair	n is: Check all that apply		
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	_ `			
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecu	red claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	_	paration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	,,		
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts		
	Yes	Other. Specify cell phone	e charges	-	
Part 3:	List Others to Be Notified About a De	bt That You Already Listed			
is tryir have n	is page only if you have others to be notified a ng to collect from you for a debt you owe to so nore than one creditor for any of the debts tha ed for any debts in Parts 1 or 2, do not fill out o	omeone else, list the original creditor It you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection agenc	y here. Similarly, if you	
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?		
	•	Line <b>4.10</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Cla	ims	
_	ox 1132 stown, NY 14702		Part 2: Creditors with Nonpriority Unsecured	Claims	
Janies	Stown, NT 14702	Last 4 digits of account number			
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?		
EOS C			☐ Part 1: Creditors with Priority Unsecured Cla	ims	
	anal Blvd., Suite 130		■ Part 2: Creditors with Nonpriority Unsecured		
Roche	ester, NY 14623	Last 4 digits of account number	, ,		
	nd Address son Capital Systems	On which entry in Part 1 or Part 2 did you Line <b>4.17</b> of ( <i>Check one</i> ):	ou list the original creditor?  Part 1: Creditors with Priority Unsecured Cla	ima	
	Cleland Road		Part 2: Creditors with Nonpriority Unsecured		
Saint (	Cloud, MN 56303		Part 2: Creditors with Nonpriority Unsecured	Claims	
		Last 4 digits of account number			
		On which entry in Part 1 or Part 2 did yo			
			Part 1: Creditors with Priority Unsecured Cla		
_	ox 12914 k, VA 23541		Part 2: Creditors with Nonpriority Unsecured	Claims	
	.,	Last 4 digits of account number			
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?		
	source Recovery LLC		☐ Part 1: Creditors with Priority Unsecured Cla	ims	
88 Tio	ga Ave.		■ Part 2: Creditors with Nonpriority Unsecured	Claims	
	20 i ng, NY 14830				
••••	.5,	Last 4 digits of account number			
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?		
			☐ Part 1: Creditors with Priority Unsecured Cla	ims	
	ga Ave.		■ Part 2: Creditors with Nonpriority Unsecured	Claims	
Suite 2	201 ng, NY 14830				
COLLIN		Last 4 digits of account number			
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?		
STHC			☐ Part 1: Creditors with Priority Unsecured Cla	ims	
	. Water St.		■ Part 2: Creditors with Nonpriority Unsecured		
Elmira	ı, NY 14901		, , ,		

Last 4 digits of account number

Debtor 1	Todd L. Miraglia
Debtor 2	Nyree D. Miraglia

Case	number	(if known)	

Name and Address	On which entry in Part 1 or Part 2 did	,		
STHCC	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
225 W. Water St. Elmira, NY 14901		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Lillia, Wi 14301	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
STHCC	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
225 W. Water St. Elmira, NY 14901		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Enima, 141 14001	Last 4 digits of account number			

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 40,423.86
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 10,777.10
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 51,200.96

Fill in this inform	nation to identify your	case:			
Debtor 1	Todd L. Miraglia				
	First Name	Middle Name	Last Name		
Debtor 2	Nyree D. Miraglia				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	WESTERN DISTRICT	OF NEW YORK		
Case number					Check if this is an
				_	amended filing

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.3	,				
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	,			2 0000	
	Name				<del>_</del>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Fill in this in	nformation to identify your	case:			
Debtor 1	Todd L. Miraglia				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Nyree D. Miraglia First Name	Middle Name	Last Name		
	s Bankruptcy Court for the:	WESTERN DISTRICT			
0					
Case numbe	er				Check if this is an amended filing
Official	Form 106H				
		obtors			40/45
Scheat	ıle H: Your Cod	eptors			12/15
	nd case number (if known).  ou have any codebtors? (If y	, ,		as a codebtor.	
■ No □ Yes					
	n the last 8 years, have you California, Idaho, Louisiana,				states and territories include
	60 to line 3. Did your spouse, former spou	ise or legal equivalent liv	e with you at the time?		
□ 1 C3. 1	Dia your spouse, former spou	ise, or legal equivalent liv	e with you at the time:		
in line 2	e again as a codebtor only it 16D), Schedule E/F (Official	f that person is a guarar	ntor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	olumn 1: Your codebtor me, Number, Street, City, State and ZII	P Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	ame			_ ☐ Schedule E/F, lin	 e
				☐ Schedule G, line	
	umber Street			_	
Cit	ty	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			☐ Schedule E/F, lin	
				☐ Schedule G, line	
	umber Street			_	
Cit	ty	State	ZIP Code		

Fill	in this information to identify your	rase.								
	otor 1 Todd L. Mi									
	otor 2 Nyree D. M									
	ted States Bankruptcy Court for th	e: WESTERN DISTRIC	Γ OF NEW YORK							
Cas	se number lown)		-				ck if this is: An amende A suppleme	d filing	g postpetitio	n chapter
_	W: 1 E 4001								ollowing date	
	fficial Form 106l					Ī	MM / DD/ Y	YYY		
	chedule I: Your Inc		pple are filing togeth	er (Deb	tor 1	and De	btor 2), bo	th are equ	ially respon	12/15 sible for
sup spo atta	plying correct information. If youse. If you are separated and youch a separate sheet to this form  t 1: Describe Employment	u are married and not fili our spouse is not filing w . On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ide infoi	is li mat	ving witl ion abοι	n you, inclu ut your spo	ude inforn ouse. If mo	nation abou ore space is	it your needed,
1.	Fill in your employment		Debtor 1				Debtor 2	or non-fi	ling spouse	<u>,</u>
	information.  If you have more than one job,		■ Employed				☐ Employed			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				■ Not employed			
		Occupation	Detailer							
	Include part-time, seasonal, or self-employed work.	Employer's name	Fox Auto							
	Occupation may include student or homemaker, if it applies.	Employer's address	150 Robert Dan Painted Post, N		-					
		How long employed t	here? 3 yrs.				_			
Par	t 2: Give Details About Mo	onthly Income								
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, writ	te \$0 in the	space. Inc	clude your no	on-filing
	u or your non-filing spouse have n e space, attach a separate sheet t		ombine the information	n for all	emp	loyers fo	r that perso	n on the li	nes below. It	f you need
						For De	ebtor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$		2,067.00	\$	0.00	<u>)                                    </u>
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	0.00	<u>)                                    </u>

4. **\$ 2,067.00** 

0.00

4. **Calculate gross Income.** Add line 2 + line 3.

Case number (if known)

				For Debtor 1			For Debtor 2 or non-filing spouse				
	Copy	y line 4 here	4.		\$	2,067	7.00	\$		0.00	)
_											
5.	List a	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$_		6.73	\$		0.00	_
	5b.	Mandatory contributions for retirement plans	5b		\$_		0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c		\$_		0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d		\$_		0.00	\$		0.00	
	5e.	Insurance	5e		\$_		0.00	\$		0.00	_
	5f.	Domestic support obligations	5f.		\$_		0.00	\$		0.00	_
	5g.	Union dues	5g		\$_		0.00	\$		0.00	
	5h.	Other deductions. Specify:	5h	1.+	<b>\$</b> _		0.00	+ \$		0.00	<u> </u>
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_		6.73	\$		0.00	_
7.	Calc	Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,650.27 \$						0.00	<u>)                                    </u>		
8.	List a	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı.	\$	,	0.00	\$		0.00	
	8b.	Interest and dividends	8b		\$		0.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c		\$		0.00	\$		0.00	_
	8d.	Unemployment compensation	8d		\$		0.00	\$		0.00	
	8e.	Social Security	8e		\$-		0.00	\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$		0.00	\$		0.00	_
	8g.	Pension or retirement income	 8g	١.	\$	(	0.00	\$		0.00	)
	8h.	Other monthly income. Specify: Mother's pension	8h	1.+	\$		0.00	+ \$		663.73	3
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$		0.00	\$		663.7	<b>'</b> 3
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		1,650.27	+ \$		663.73	= \$_	2,314.00
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not sify:	depe			•			Schedule	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaes								\$	2,314.00
										Combi	ined Iy income
13.	Do y∈	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	?								

Fill	in this information to ic	lentify your case:								
Debtor 1 Todd L. Miraglia					Check if this is:					
	Debtor 2 Nyree D. Miraglia Spouse, if filing)					<ul> <li>☐ An amended filing</li> <li>☐ A supplement showing postpetition chapte</li> <li>13 expenses as of the following date:</li> </ul>				
Unit	ted States Bankruptcy Co	urt for the: WESTE	ERN DISTRICT OF NEW Y	ORK	-	MM / DD / YYYY				
Cas	se number									
	nown)		<del></del>							
	fficial Form 1									
Be	chedule J: Y as complete and acc ormation. If more spa mber (if known). Ans	urate as possible ce is needed, atta	. If two married people ar ich another sheet to this	e filing together, be form. On the top of	oth are equa	ally responsible fo onal pages, write y	12/15 or supplying correct your name and case			
Par 1.	t 1: Describe You Is this a joint case?									
	☐ No. Go to line 2.									
	■ Yes. Does Debto	or 2 live in a separ	ate household?							
	■ No □ Yes. Debt	or 2 must file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.				
2.	Do you have depen	dents? □ No								
	Do not list Debtor 1 a		Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?			
	Do not state the			-			□ No			
	dependents names.			Son		25	■ Yes □ No			
				Mother		74	■ Yes			
						- <del></del>	□ No			
							Yes			
							□ No □ Yes			
3.	Do your expenses in expenses of people yourself and your of t 2:	other than	No Yes				_ 160			
Est	timate your expenses	as of your bankr	uptcy filing date unless y y is filed. If this is a supp							
the			government assistance in cluded it on Schedule I: Y			Your exp	enses			
4.	The rental or home payments and any re		nses for your residence. In or lot.	nclude first mortgage	e 4. \$		550.00			
	If not included in li	ne 4:								
	4a. Real estate ta	xes			4a. \$		0.00			
		eowner's, or rente	's insurance		4b. \$		0.00			
		nance, repair, and			4c. \$		0.00			
5.		association or con		mo oquity loops	4d. \$ 5. \$		0.00			
J.	Additional mortgag	e payments for yo	our residence, such as ho	ne equity loans	ა. ֆ		0.00			

Nyree D.	Miraglia	Case num	iber (if known)	
ties.				
	heat, natural gas	6a.	\$	100.00
		6b.	·	60.00
			·	228.00
•			· -	0.00
	•		·	600.00
				0.00
			· -	100.00
•			·	50.00
•			*	50.00
	•	• • • •	·	30.00
		12.	\$	250.00
		13.	\$	50.00
		14.	\$	0.00
ırance.	-			
not include in	surance deducted from your pay or included in lines 4 or 20.			
. Life insura	nce	15a.	\$	0.00
. Health ins	urance	15b.	\$	46.20
Vehicle ins	surance	15c.	\$	210.00
. Other insu	rance. Specify:	15d.	\$	0.00
<b>es.</b> Do not in	clude taxes deducted from your pay or included in lines 4 or 20.			
		16.	\$	0.00
			_	
			*	0.00
				0.00
			· <u> </u>	0.00
	· ·		\$	0.00
			¢	0.00
		<b>61).</b> 10.		
	s you make to support others who do not live with you.	10	Φ	0.00
,	erty expenses not included in lines 4 or 5 of this form or on		our Income	
				0.00
			· ·	0.00
			· -	0.00
				0.00
			· -	
			·	0.00
er. Specily:	MISC. pet expenses		+φ	50.00
culate your r	nonthly expenses			
Add lines 4	through 21.		\$	2,344.20
Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2	\$	
Add line 22a	a and 22b. The result is your monthly expenses.		\$	2,344.20
	a and black of the case			, -
-		00-	¢	0.044.00
	,			2,314.00
. Copy your	monthly expenses from line 22c above.	23b.	-\$	2,344.20
Subtract v	our monthly expenses from your monthly income.			
		23c.	\$	-30.20
example, do yo	u expect to finish paying for your car loan within the year or do you expec			e or decrease because of a
'es.	Explain here:			
	Nyree D.  Ities: Electricity, Water, sey Telephone Other. Spe d and house Ideare and ce Ining, laund Isonal care p Itical and der Insportation. In tinclude in Life insura Health insi Vehicle ins Other insu Insurance. In tinclude in the life insura Health insi Vehicle ins Other insu Insurance. In tinclude in the life insura In the least include in the life insurant In the life insuran	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: d and housekeeping supplies dcare and children's education costs thing, laundry, and dry cleaning sonal care products and services lical and dental expenses nsportation. Include gas, maintenance, bus or train fare. not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations riance. Oit include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Health insurance Vehicle insurance Other insurance. Other insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify: alliment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Or payments of alimony, maintenance, and support that you did not report ucted from your pay on line 5, Schedule I, Your Income (Official Form 10 er payments you make to support others who do not live with you. cify: er real property expenses not included in lines 4 or 5 of this form or on 3. Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: Misc. pet expenses culate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106. Add lines 22a and 22b. The result is your monthly expenses. Culate your monthly expenses from pour monthly expenses. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your expenses within the year aftexample, do you expect to finish paying for your car loan within the year or do you expectific	tites: Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: da and housekeeping supplies da and housekeeping supplies stodare and children's education costs thing, laundry, and dry cleaning sonal care products and services lical and dental expenses solical include car payments. Interportation. Include gas, maintenance, bus or train fare. Interportation. Include gas, maintenance, bus or train fare. Interportation include care payments. Interportation include care payments. Life insurance Life insurance Life insurance Other insurance specify: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. City: Ses. Do not include taxes deducted from your pay or included in lines 4 or 5 of this form or on Schedule I: You payments of allimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Offi	tites: Electricity, heat, natural gas  Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Ge. \$ Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Ge. \$ Other. Specify: Gd. \$ d and housekeeping supplies Gr. \$ dare and children's education costs B. \$ Sthing, laundry, and dry cleaning Sonal care products and services Intelligent of the services Intelligent of

Fill in this i	nformation to identify your	case:			
Debtor 1	Todd L. Miraglia				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Nyree D. Miraglia First Name	Middle Name	Last Name		
(Spouse II, IIIII)	g) i list ivallie	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	WESTERN DISTRICT (	OF NEW YORK		
Case number	er				
(if known)				☐ Check	if this is an
				amend	ded filing
Official F	Form 106Dec				
Declai	ration About a	ın Individual	Debtor's Sch	redules	12/15
f two marrie	ed people are filing together	r, both are equally respo	nsible for supplying corre	ct information.	
				laking a false statement, concealin fines up to \$250,000, or imprisonm	
years, or bo	oth. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.	auptoy case can result in	mies up to \$250,000, or imprisorming	ent for up to 20
	Sign Below				
Did yo	ou pay or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?	
■ N	0				
□ Ye	es. Name of person			Attach Bankruptcy Petition Pi	reparer's Notice,
				Declaration, and Signature (C	Official Form 119)
Under p	penalty of perjury, I declare	that I have read the sum	mary and schedules filed	with this declaration and	
	ey are true and correct.		•		
Y Iol	Todd I Miroglio		Y /c/ Nurse D	Miraglia	
	Todd L. Miraglia dd L. Miraglia		X <u>/s/ Nyree D. l</u> Nyree D. Mir		
	nature of Debtor 1		Signature of De		
J			-		
Dat	te October 23, 2019		Date Octob	er 23, 2019	

Eill is	this infor	mation to identify you	, case.			
Debt		Todd L. Miraglia				
Debt	J1 1	First Name	Middle Name	Last Name		
Debt	or 2	Nyree D. Miraglia	a			
(Spous	e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ba	ankruptcy Court for the:	WESTERN DISTRICT OF	NEW YORK		
Case (if know	number _				_	heck if this is an mended filing
Sta Be as	complete	and accurate as possi	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for supp additional pages, write you	
Part	1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
1. V	Vhat is you	ır current marital statu	s?			
] [	■ Married					
2. [	Ouring the	ast 3 years, have you	lived anywhere other than	where you live now?		
] [	■ No □ Yes. Li	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
[		•	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Expla	in the Sources of You	r Income			
F	ill in the tot	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		dar years?
[	□ No ■ Yes. Fi	ll in the details.				
			D.1.		D.1.	
			Debtor 1	Cross in serve	Debtor 2	Cross in serve
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$19,601.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debto Debto		odd L. Mira lyree D. Mir			Cas	e number (if known)	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips	\$23,651.00	■ Wages, commissions, bonuses, tips	\$14,169.00		
				☐ Operating a business		☐ Operating a business	
		ndar year be o December		■ Wages, commissions, bonuses, tips	\$20,977.00	■ Wages, commissions, bonuses, tips	\$1,912.00
				☐ Operating a business		☐ Operating a business	
	l Yes	. Fill in the do	etails.	Debtor 1 Sources of income Describe below.	Gross income from each source	Debtor 2 Sources of income Describe below.	Gross income (before deductions
					(before deductions and exclusions)		and exclusions)
Part 3	: Li:	st Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
6. A	_	Neither D individual  During the No.  Yes	ebtor 1 nor I primarily for a 90 days before Go to line 7 List below paid that controlled	personal, family, or househoute you filed for bankruptcy, div.  beach creditor to whom you paiteditor. Do not include payment payments to an attorney for the	umer debts. Consumer debtald purpose."  id you pay any creditor a total  id a total of \$6,825* or more into the ford domestic support oblights bankruptcy case.	s are defined in 11 U.S.C. § 10  I of \$6,825* or more?  In one or more payments and stations, such as child support a or after the date of adjustmen	the total amount you and alimony. Also, do
	l Yes			or both have primarily consu		I of \$600 or more?	
		■ No.	Go to line 7	7.			
		□ Yes	List below include pay	each creditor to whom you pai		d the total amount you paid that port and alimony. Also, do not	

**Total amount** 

paid

Amount you

still owe

**Dates of payment** 

**Creditor's Name and Address** 

Was this payment for ...

	btor 1 Todd L. Miraglia btor 2 Nyree D. Miraglia		Cas	e number (if known)		
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any gen n control, or owner of 20% o	neral partners; partner or more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	al partner; corporations gent, including one for
	■ No □ Yes. List all payments to an insider.	Dates of novement	Total amount	A	Danas fan	this manner
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		ments or transfer a	iny property on a	ccount of a de	ebt that benefited an
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment
Par	rt 4: Identify Legal Actions, Repossessio	ons, and Foreclosures	pu.u			
9.	Within 1 year before you filed for bankrup: List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Guthrie Medical Group, PC v. Todd Miraglia CV-000321-19	collection	Corning City C 500 Nasser Civ Plaza Corning, NY 14	ic Center	■ Pending □ On appe □ Conclude	al
	Guthrie Corning Hospital v. Todd Miraglia CV09-0242	collection	Corning City C	ourt	■ Pending □ On appe □ Conclud	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied?
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>					
	Creditor Name and Address	Describe the Property		Date		Value of the property
	Guthrie Corning Hospital	Explain what happened 10% of wages	d	9/19.	10/19	\$400.00
	1 Guthrie Drive Corning, NY 14830-3696	☐ Property was reposse☐ Property was foreclos	sed.	3/13	10/13	Ψ-00.00
		<ul><li>■ Property was garnish</li><li>□ Property was attache</li></ul>				
		i Toperty was attache	u, seizeu oi levieu.			

_	btor 2 Nyree D. Miraglia	Case number	(if known)				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec  ■ No □ Yes. Fill in the details.	otcy, did any creditor, including a bank or financial ins ause you owed a debt?	titution, set off any am	nounts from your			
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount			
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes	cy, was any of your property in the possession of an a nother official?	ssignee for the benefi	t of creditors, a			
Par	rt 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.	tcy, did you give any gifts with a total value of more th	nan \$600 per person?				
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and	Describe the gifts	Dates you gave the gifts	Value			
1.1	Address:	toy did you give any gifts or contributions with a total	Lyaluo of more than \$1	600 to any charity?			
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No  Yes. Fill in the details for each gift or contribution.						
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value			
Par	rt 6: List Certain Losses						
15.	Within 1 year before you filed for bankrupt or gambling?	cy or since you filed for bankruptcy, did you lose anyt	hing because of theft,	fire, other disaster,			
	Yes. Fill in the details.						
	how the loss occurred	escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Par	rt 7: List Certain Payments or Transfers						
16.	consulted about seeking bankruptcy or pro	ey, did you or anyone else acting on your behalf pay of paring a bankruptcy petition? parers, or credit counseling agencies for services required		y to anyone you			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Cooper, Pautz, Weiermiller & Daubne LL 2854 Westinghouse Road Horseheads, NY 14845 mweiermiller@cpwdlaw.com		10/3/19	\$2,110.00			

	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No	s or to make payments			erty to anyone who
	Yes. Fill in the details.				
	Person Who Was Paid Address	Description and v transferred	alue of any prope	or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupto	cy, did you sell, trade, c	or otherwise transf	er any property to anyone, oth	er than property
	transferred in the ordinary course of your but Include both outright transfers and transfers materially include gifts and transfers that you have already No  Yes, Fill in the details.	usiness or financial affa de as security (such as t	airs? the granting of a sec		
				-	
	Person Who Received Transfer Address	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you				
	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prof		y property to a sel	If-settled trust or similar device	e of which you are a
	No No				
	Yes. Fill in the details.				
	Name of trust	Description and v	alue of the proper	ty transferred	Date Transfer was made
Par	8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	t Boxes, and Stora	ge Units	
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc	r other financial accou	nts; certificates of		
	■ No				
	Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, any s	safe deposit box or other depo	sitory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit o	r place other than your	home within 1 yea	ar before you filed for bankrup	tcy?
	■ No				
	Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S		escribe the contents	Do you still have it?
		State and ZIP Code)			

Par	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	ty you borrow	ved from, are storing for	r, or hold in trust	
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the	property	Value	
Par	t 10: Give Details About Environmental Informa	ation				
For	the purpose of Part 10, the following definitions	apply:				
_	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	_	aw, whether y	you now own, operate,	or utilize it or used	
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		waste, hazar	dous substance, toxic	substance,	
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	they occurre	ed.		
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in v	riolation of an environm	ental law?	
	■ No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		mental law, if you	Date of notice	
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		mental law, if you	Date of notice	
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental lav	w? Include settlements	and orders.	
	■ No					
	Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the	e case	Status of the case	
Par	t 11: Give Details About Your Business or Con	nections to Any Business				
27.		-	v of the follow	wing connections to an	v husiness?	
	☐ A sole proprietor or self-employed in a t	•	•		y buomeos.	
	☐ A member of a limited liability company					
	☐ A partner in a partnership	, , , , , , , , , , , , , , , , , , , ,	,			
	☐ An officer, director, or managing execut	tive of a corporation				
☐ An owner of at least 5% of the voting or equity securities of a corporation						

	btor 1 btor 2	Todd L. Miraglia Nyree D. Miraglia		Ca	se number (if known)
	<b>=</b> 1	No. None of the above applies. Go to	Part 12.		
		res. Check all that apply above and f	ill in the details below for each	business.	
	Busi Addı	ness Name ress	Describe the nature of the b	usiness	Employer Identification number Do not include Social Security number or ITIN.
		per, Street, City, State and ZIP Code)	Name of accountant or book	kkeeper	Dates business existed
28.		n 2 years before you filed for bankru utions, creditors, or other parties.	otcy, did you give a financial st	atement to ar	nyone about your business? Include all financial
	_	No Yes. Fill in the details below.			
	Nam Addı (Numb		Date Issued		
Pa	rt 12:	Sign Below			
are witl	true ar h a ban		a false statement, concealing p	roperty, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection urs, or both.
/s/	Todd	L. Miraglia	/s/ Nyree D. Mirag	lia	
		Miraglia	Nyree D. Miraglia	_	
Sig	gnature	e of Debtor 1	Signature of Debtor	2	
Da	te O	ctober 23, 2019	Date October 2	3, 2019	
Did	you at	tach additional pages to Your Staten	nent of Financial Affairs for Ind	ividuals Filin	g for Bankruptcy (Official Form 107)?
	No				
□ <b>`</b>	/				
	res				
	you pa	ay or agree to pay someone who is n	ot an attorney to help you fill o	ut bankruptcy	y forms?
<b>=</b> 1	<b>you pa</b> No		, .,		y forms?  and Signature (Official Form 119).

	mation to identify your	case:			
Debtor 1	Todd L. Miraglia First Name	Middle Name	Last Name		
Debtor 2	Nyree D. Miraglia				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK				
Case number (if known)					k if this is an ded filing
Official Fo	orm 108				
Stateme	nt of Intentio	n for Individ	uals Filing Unde	r Chapter 7	12/15
creditors have	lividual filing under cha ve claims secured by yo	ur property, or		-	
You must file th		rithin 30 days after you	file your bankruptcy petition o	r by the date set for the meeting	

on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of property	☐ Retain the property and enter into a  Reaffirmation Agreement. ☐ Retain the property and [explain]:	☐ Yes
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	<u>_</u>
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Todd L. Miraglia Debtor 2 Nyree D. Miraglia		Case number (if kno	Case number (if known)			
			, <u> </u>			
name	e:	☐ Retain the property and redeem it.	☐ Yes			
		☐ Retain the property and enter into a				
	ription of	Reaffirmation Agreement.				
prope	•	☐ Retain the property and [explain]:				
secur	ring debt:					
Part 2:	List Your Unexpired Personal Proper	tv Leases				
For any n the in	unexpired personal property lease that formation below. Do not list real estate	you listed in Schedule G: Executory Contracts and Unexpleases. Unexpired leases are leases that are still in effect; ty lease if the trustee does not assume it. 11 U.S.C. § 365(	the lease period has not yet ended.			
	pe your unexpired personal property lea		Will the lease be assumed?			
	,					
Lessor's			□ No			
Property	tion of leased v:		☐ Yes			
.,.,	,		L res			
Lessor's	s name:		□ No			
	tion of leased					
Property	y:		☐ Yes			
Lessor's	s name:		□ No			
	tion of leased		<b>110</b>			
Property	y:		☐ Yes			
Lessor's	s name:		□ No			
	tion of leased		□ NO			
Property	y:		☐ Yes			
Lessor's	e name:		□ No			
	tion of leased		□ No			
Property	y:		☐ Yes			
1			<b>-</b>			
Lessor's Descrip	tion of leased		□ No			
Property			☐ Yes			
Lessor's	a name:		П.,,			
	tion of leased		□ No			
Property			☐ Yes			
Part 3:	Sign Below					
		dicated my intention about any property of my estate that	secures a debt and any personal			
	that is subject to an unexpired lease.					
	Todd L. Miraglia	X /s/ Nyree D. Miraglia				
	odd L. Miraglia	Nyree D. Miraglia				
210	gnature of Debtor 1	Signature of Debtor 2				
Da	te October 23, 2019	Date				

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### **United States Bankruptcy Court** Western District of New York

In re	Todd L. Miraglia Nyree D. Miraglia		Case No.			
111 10	Nylee D. Milagila	Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR D	EBTOR(S)		
co	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(lompensation paid to me within one year before the filing erendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to	)	
	For legal services, I have agreed to accept		\$	1,600.00		
	Prior to the filing of this statement I have received		\$	1,600.00		
	Balance Due			0.00		
2. T	he source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. T	he source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4. ■	I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are men	abers and associates of my law firm	m.	
	I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name					
5. Iı	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
b. c.	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed]	ment of affairs and plan whic	h may be required;			
6. B	y agreement with the debtor(s), the above-disclosed fee  Representation of the debtors in any disc  proceeding.			ns or any other adversary		
		CERTIFICATION				
	certify that the foregoing is a complete statement of any nkruptcy proceeding.	agreement or arrangement for	or payment to me for	representation of the debtor(s) in		
Oc	etober 23, 2019	/s/ Mark A. Weie				
Da	te	Mark A. Weierm Signature of Attorn				
		Cooper, Pautz, \	Neiermiller & Daul	oner, LLP		
		2854 Westingho Horseheads, NY				
			ax: 607-739-9373			
		mweiermiller@c	pwdlaw.com			
		Name of law firm				

### **United States Bankruptcy Court** Western District of New York

ın re	Nyree D. Miraglia		Case No.	
	-	Debtor(s)	Chapter	7
	V	ERIFICATION OF CREDITOR	MATRIX	
he above	e-named Debtors hereby ve	rify that the attached list of creditors is true and co	orrect to the best	of their knowledge.
	e-named Debtors hereby ve	/s/ Todd L. Miraglia	orrect to the best	of their knowledge.
	·	/s/ Todd L. Miraglia Todd L. Miraglia	orrect to the best	of their knowledge.
	·	/s/ Todd L. Miraglia	orrect to the best	of their knowledge.
Date: <u>C</u>	·	/s/ Todd L. Miraglia Todd L. Miraglia	orrect to the best	of their knowledge.
Date: <u>C</u>	October 23, 2019	/s/ Todd L. Miraglia  Todd L. Miraglia  Signature of Debtor	orrect to the best	of their knowledge.

Todd L. Miraglia

Arnot Medical Services PC 600 Ivy Street Elmira, NY 14905

Arnot Ogden Medical Center 600 Roe Avenue Elmira, NY 14901

Associated Radiologists 100 E. 14th St. Elmira Heights, NY 14903

Capital One Bank (USA), NA P.O. Box 71083 Charlotte, NC 28272-1083

CareCredit/Synchrony Bank P.O. Box 960061 Orlando, FL 32896-0061

CBJ Credit Recovery P.O. Box 1132 Jamestown, NY 14702

Corning Hospital 1 Guthrie Drive Corning, NY 14830-3696

Credit One Bank
P.O. Box 60500
City of Industry, CA 91716-0500

Department of Education P.O. Box 2837 Portland, OR 97208

Emergency Physician Services P.O. Box 740021 Cincinnati, OH 45274

EOS CCA 300 Canal Blvd., Suite 130 Rochester, NY 14623 Five Star Urgent Care 830 County Route 64 Elmira, NY 14903

Guthrie Clinic, Ltd. Guthrie Square Sayre, PA 18840

Jefferson Capital Systems 16 McCleland Road Saint Cloud, MN 56303

Kay Jewelers 375 Ghent Road Akron, OH 44333-2668

Portfolio Recovery Associates LLC P.O. Box 12914 Norfolk, VA 23541

Quest Diagnostics P.O. Box 740505 Cincinnati, OH 45274

RR Resource Recovery LLC 88 Tioga Ave. Suite 201 Corning, NY 14830

STHCC 225 W. Water St. Elmira, NY 14901

Twin Tiers Eye Care Associates 207 Madison Ave. Elmira, NY 14901-3204

Verizon Wireless P.O. Box 26055 Minneapolis, MN 55426